Please	type a	aula e	sian	(+)	inside	this box	→	+
.000	., , ,	- p.u.o	0.9.,			UIIO DOX		

PTO/SB/01 (10-00)

Approved for use through 10/31/2002, OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	1	Attorney Docket Number		ber 2123	21230			
DECLARATION FOR UT	ILITY OR	First Named Inventor			W. Pfeiffer			
DESIGN	rion L	COMPLETE IF KNOWN						
PATENT APPLICAT (37 CFR 1.63)		Application Number /						
	1	Filing Date						
Declaration Declara Submitted OR Submitt		Group Art Unit						
	surcharge R 1.16(e))	Examiner Name						
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: SYSTEM AND APPARATUS FOR FILLING CONTAINERS WITH BULK PARTICULATE MATERIALS the specification of which (Title of the Invention) is attached hereto OR was filed on (MM/DD/YYYY) as United States Application Number or PCT International Application Number I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above: I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part applications, material information which became available between the filling date of the prior application and the national or PCT international filling date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filling date before that of the application on which priority is claimed.								
Prior Foreign Application	· · · · · · · · · · · · · · · · · · ·	Foreign Filing (Date	Priority	Certified Co	ppy Attached?		
						0000		
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:								
I hereby claim the benefit under 35 U Application Number(s)	United States provis	sional app	olication(s) list	ed below.				
Pillig Da		(Additional provisional app numbers are listed on a supplemental priority data PTO/SB/02B attached he		n a / data sheet		

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please type a plus sign (+) inside this box +

Pto/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer Nu or Bar Code					R 🛮	Correspondence address below	
Name Peter N. Lalos	***							
Address STEVENS, DAVIS, MILLER & MOSHER, LLP								
Address 1615 L Street, NW, Suite 850								
City Washington	Washington				D.C.		ZIP 20036	
Country U.S.A.	U.S.A. Telephone 202/785			5-0100			Fax 202/408-5200	
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.								
NAME OF SOLE OR FIRST INVENTOR:								
Given Name (first and middle [if any]) John W. Family Name or Surname Pfeiffer								
							Date 17, 2002	
Residence: City Hughesville State PA					Country U.S.A.		Citizenship U.S.	
Mailing Address 714 Huddy Hill Road								
Mailing Address								
City Hughesville	y Hughesville State PA			ZIP 17737			Country U.S.A.	
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor								
Given Name (first and middle [if any]) Family Name or Surname								
Inventor's Signature Date								
Residence: City State				Country		try	Citizenship	
Mailing Address								
Mailing Address								
City	State			ZIP			Country	
Additional inventors are being named on supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.								